REGISTRAR'S PACKAGE

Final Regulations for the Board of Medicine (18 VAC 85-101-10 et seq.) Basis, Purpose, Substance, Issues & Estimated Impact

1. **Basis of the Regulation**

Title 54.1, Chapter 24 and §§ 54.1-2956.1 and 54.1-2956.8:2 of the *Code of Virginia* provide the basis for this regulation.

Chapter 24 establishes the general powers and duties of the health regulatory boards including the power to establish qualifications for licensure and the responsibility to promulgate regulations.

§§ 54.1-2956.8:1 and 54.1-2956.8:2 establish licensure for radiologic technologists and radiologic technologists-limited and require the Board to establish the requisite training and examination for such licensure.

2. <u>Statement of Purpose</u>:

The purpose for the amendments is to address concerns that the lack of educational standards and no measure of minimal competency for licensure as a radiologic technologist-limited. The amended regulations are adopted by the Board to carry out its responsibility to protect the health, safety, and welfare of the people who are consumers of radiological services in the Commonwealth.

3. Substance of Regulation:

Part I.

18 VAC 85-101-10. Definitions.

Amendments are proposed to eliminate a term not used in regulation.

Part II.

18 VAC 85-101-40. Examination requirements.

The amendments are for clarification only.

18 VAC 85-101-50. Traineeship for unlicensed graduate.

An amendment will allow the applicant to continue working as a trainee for 14 days after receipt of the results of the licensure examination. Current regulations require immediate termination.

Part III.

18 VAC 85-101-60. Examination requirements.

The proposed amendments establish a requirement for passage of a national examination for a Limited Scope of Practice in Radiography for those applicants who will practice in a limited capacity under the direction of a doctor of medicine or osteopathy. All such applicants would be required to pass the core section of the examination in addition to the section of the examination on specific radiographic procedures, depending on the anatomical area in which the applicant intends to practice. Until the appropriate examinations are available, persons intending to be licensed in bone densitometry or procedures of the abdomen and pelvis may be licensed by submission of a notarized statement attesting to the applicant's training and competency and by performing under direct supervision and observation the required number of radiologic examinations. To be licensed to perform bone densitometry, the applicant shall have successfully completed at least 10 such examinations; to perform radiography on the pelvis or abdomen, the applicant must have successfully completed at least 25 such examinations, and the statement from the supervising technologist or physician must attest to certain competencies.

An applicant for limited-licensure to practice with a doctor of chiropractic is required to pass the examination offered by the ACRRT; and an applicant for limited-licensure to practice with a doctor of podiatry is required to pass an examination acceptable to the board.

An amendment to proposed regulations is adopted to clarify that the Board rather than the ARRT must set the passing score on the examination.

18 VAC 85-101-70. Educational requirements for radiologic technologists-limited.

Amendments are proposed to require an educational program for the limited license to practice under the direction of a doctor of medicine and osteopathy must be directed by a radiological technologist with ARRT certification with instructors who are licensed radiologic technologists. The 10 hours required in radiographic procedures would have to be taught by a radiologic technologist with ARRT certification or a licensed doctor of medicine, osteopathy, podiatry or chiropractic. An amendment would further allow the board to accept other programs which train persons to practice in a limited capacity in a particular type of practice, such as podiatry.

An amendment to proposed regulations is adopted to specify that the director of an educational program must have a bachelor's rather than a master's degree.

Part VI.

18 VAC 85-101-130. General requirements.

Amendments are proposed in this section to require the radiologic technologist-limited to inform the board of the anatomical area in which he is qualified by training and examination to practice and to prohibit the performance of mammography by persons holding that license.

18 VAC 85-101-160. Fees required by the board.

Current regulations state that, unless otherwise provided, all fees are non-refundable. The current provision for retention of \$25 of the application fee if an applicant withdraws his application is being repealed; the policy of the board is to make all submitted fees non-refundable.

4. <u>Issues of the Regulation:</u>

Issue 1: The need to amend educational requirements to ensure a minimal level of competency.

Since the implementation of the statutory mandate to license radiologic technologists-limited on January 1, 1997, there has been a lack of clarity about their educational requirements and no measure of their minimal competency. Questions have been raised by applicants, physician-employers, and educators about the "educational program" requirements which set forth the number of hours required but do not offer guidance on the necessary skills and knowledge and do not set any standard for quality. There is a great deal of concern and uneasiness about the educational background and minimal threshold of competency. Those responsible for training persons for a limited scope license do not believe that the current requirements assure patient safety and quality radiography.

There is also concern that, without some educational standards for the radtech-limited programs, there is an opportunity for unqualified persons to charge students for enrollment in a substandard course which does not provide the training necessary to practice with skill and safety. Those who are planning to provide a quality educational program for the radiologic technologists-limited are seeking some standard and a testing program for entry into the profession.

Physicians who employ the radiologic technologist-limited have expressed concern that there is no assurance that that person, who is licensed by the state, has a minimal level of competency to practice safely and effectively. Amendments are necessary to assure the consuming public that persons with licensure have sufficient training in radiographic procedures to minimize the risk from over-exposure to X-ray, poor image production or unnecessary repetition of radiography.

The Advisory Board on Radiologic Technology has strongly encouraged and supported additional educational requirements in regulation. After consideration of various alternatives and consultation with educational programs in the Commonwealth, the Board recommended that the program should be directed by a radiologic technologist with a bachelor's degree and current ARRT certification and that courses should be taught by a licensed radiologic technologist or by a licensed doctor. Since there is no accreditation for the programs, the Board has determined that the education should, at a minimum, be provided by a person licensed under this Board.

Issue 2: The need to amend regulation to add a requirement for an examination to assure a minimal level of competency.

Since there is **no accreditation requirement** for educational programs that train radiologic technologist-limited, there needs to be some measurable standard for minimal competency. Proposed regulations will assure that the programs have qualified instructors, but the Board has determined that an examination of knowledge and skills is essential to assure minimal competency. The Board has proposed the national examination for Limited Scope of Practice in Radiography offered by the American Registry of Radiologic Technologists. It provides a readily available, legally defensible, relatively inexpensive (cost of \$35) test of minimal competency in core knowledge of radiography and additional testing of specific radiographic procedures depending on the anatomical areas in which the applicant intends to practice.

If there was a mechanism for approving the education and training received for the limited license, it could provide some assurance that minimal competencies have been achieved. The Board

chose not to impose accreditation standards or a process of Board approval, but instead to rely on a proven examination to provide that measure of minimal competency.

Persons who plan to apply for the limited license to practice with a doctor of chiropractic may take the examination which is specifically designed for the requirements of that practice and which is offered by the ACRRT. Persons who plan to apply for the limited license to practice with a doctor of podiatry may take the examination specifically designed for the requirements of that practice.

Issue 3: The qualification of persons who perform radiography of the abdomen and pelvis, bone densitometry and mammograhy.

The ARRT examination for Limited Scope of Practice in Radiography does not include content areas on procedures for the abdomen and pelvis because the ARRT does not believe those should be performed by a person with a <u>limited</u> license. Likewise, the ARRT has not yet accepted bone densitometry for the limited licensee. The Board discussed whether to provide in amended regulations that only fully licensed persons could x-ray the abdomen and pelvis, but it concluded that such x-rays are now being performed by persons with the limited license and that an amendment would be burdensome. Until the appropriate examinations are available, persons intending to be licensed in bone densitometry or procedures of the abdomen and pelvis may be licensed by submission of a notarized statement attesting to the applicant's training and competency and by performing under direct supervision and observation the required number of radiologic examinations. To be licensed to perform bone densitometry, the applicant shall have successfully completed at least 10 such examinations; to perform radiography on the pelvis or abdomen, the applicant must have successfully completed at least 25 such examinations, and the statement from the supervising technologist or physician must attest to certain competencies.

Upon a recommendation from the Department of Health and the Advisory Board, the Board of Medicine did propose to clarify that mammography may only be performed by a fully licensed radiologic technologist.

Advantages or disadvantages to the public:

The adoption of certain standards for educational programs and a test of minimal competency for applicants seeking licensure to perform radiography on limited anatomical areas will provide the consuming public with greater protection and will help to minimize the risks of radiography. There should be no reduction in the availability of radiographic services and no diminution of applicants for licensure as a result of proposed regulations, since the costs of training and examination are not excessive.

Advantages or disadvantages to the licensees:

Some of the concern about inadequate training and skill in the delivery of radiographic services is focused on the potential for harm to the practitioner. Unlike other health care services, radiography carries a risk to the practitioner as well as to the patient. An educational program with higher standards and professional instructors provides more assurance that those risks of unnecessary exposure will be minimized. There will be additional costs for becoming licensed, since it may be necessary for a person to attend a formal course at a local community college and there will be an examination requirement.

5. Estimated Impact of the Regulations

A. Projected number of persons affected and their cost of compliance:

There are approximately 125 - 150 new applicants each year for licensure as radiologic technologist-limited who would be affected by amendments to regulation.

For each of those applicants who would be required to take the ARRT Limited Scope of Practice examination, the cost would be \$35. There is no proposed increase in fees to the board.

For persons seeking training in the limited scope of radiography, the educational costs would be approximately \$212 to \$371, depending on the number of anatomical areas in which the student wants to be trained. The core course is 3 credit hours and costs \$159. The course in radiographic procedures for specific anatomical areas in \$53 per hour or a total of \$212 for 4 hours if the student wants to receive training in all areas for which they are allowed to practice. (Costs figures provided by Tidewater Community College.)

An applicant who has received the maximum hours of training and has passed the licensure examination would have to spend approximately \$406 qualifying for licensure.

Currently, the limited license examination is given by the ARRT only three times a year, which could result in a delay in becoming licensed for someone who completed his education earlier. By the year 2000, the ARRT intends to computerize its radiologic technologist examination and make it available to applicants on a daily basis at a local testing center. While there are no assurances from the ARRT, it would be expected that the examination for the limited scope of practice would likewise become computerized within the next two years.

B. Cost to the agency for implementation:

The Board will incur approximately \$1500 in cost for printing and mailing final amended regulations to licensees and other interested parties. There will be no additional cost for conducting a public hearing, which will be held in conjunction with a scheduled committee or board meeting. The Board does not anticipate any additional costs for investigations or administrative proceedings against radiologic technologists or radiologic technologists-limited for violations of these regulations.

C. <u>Cost to local governments</u>:

There will be no impact of these regulations on local government.

D. Fiscal Impact Prepared by the Department of Planning and Budget:

(Attached to proposed regulations)

E. Agency Response:

The agency concurred with the fiscal impact statement of the Department.